



**TOWN OF WESTPORT**  
**CONSERVATION DEPARTMENT**

TOWN HALL – 110 MYRTLE AVENUE  
WESTPORT, CT 06880  
P 203.341.1170 F 203.341.1088

## INSPECTION REQUEST

**Project Address:**

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**Name of Owner or Contact Person:**

\_\_\_\_\_ Phone # \_\_\_\_\_

Type:    ☐ CCC            ☐ S&E            ☐ Plantings            ☐ Other

**Project Description:**

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Do they need to meet someone on site?      Yes      No

Date received: \_\_\_\_\_ Time: \_\_\_\_\_

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**Notes:**

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